Washington State Department of HEALTH

Pediatric MMR Vaccine Recommendations

Age	Number of previous doses	MMR vaccine[1] recommendations	Next dose(s)
0 - 5 months	0	Vaccine is NOT recommended	Give dose 1 at: • 6-11 months, depending on risk[2,3] • 12-15 months for regular schedule
6 - 11 months	0	1 dose if traveling internationally[2] or possibly to an area with an active measles outbreak.[3] Vaccine is most effective if given at least 2 weeks prior to travel.	• Dose 1 at 12-15 months • Dose 2 at 4-6 years • Dose 2 can be given at least 28 days after dose 1 if needed
12 months - 4 years	0	Dose 1	Dose 2 at 4-6 years • Dose 2 can be given at least 28 days after dose 1 if needed
	1 (given **before** 1st birthday)	Dose 2 at least 28 days after dose 1	Dose 3 at 4-6 years • Dose 3 can be given at least 28 days after dose 2 if needed
	1 (given **on or after** 1st birthday)	No dose currently recommended	Dose 2 at 4-6 years, but can be given at least 28 days after dose 1 if needed.[4,5]
	2 (dose 1 given **on or after** 1st birthday & at least 28 days apart)	Fully vaccinated	No additional doses needed
4-17 years	0	Dose 1	Dose 2 at least 28 days after dose 1
	1 (given **before** 1st birthday)	Dose 2	Dose 3 at least 28 days after dose 2
	1 (given **on or after** 1st birthday)	Dose 2 at least 28 days after dose 1	No additional doses needed
	2 (dose 1 given **on or after** 1st birthday & at least 28 days apart)	Fully vaccinated	No additional doses needed

1. Either MMR or MMRV can be used; Measles Vaccination | Measles (Rubeola) | CDC
2. Plan for Travel | Measles (Rubeola) | CDC
3. Measles Cases and Outbreaks | Measles (Rubeola) | CDC
4. MMR Vaccine: When Is the Right Time for the Second Dose? J Pediatr Pharmacol Ther
5. Ask The Experts About Vaccines: MMR | Immunize.org

Adult MMR Vaccine Recommendations

Year born	Risk factors	Previous vaccine history	MMR doses needed
Before 1957	**HIGH Risk:** Healthcare workers, international travelers, enrolled in college or post-high school education, close contact of immunocompromised person, HIV without severe immunosuppression	No prior MMR, no lab evidence of immunity or lab confirmation of disease[1]	**2 doses** needed
		Vaccinated before 1968 with inactivated (killed) measles vaccine or vaccine of unknown type[2]	**2 doses** needed
		Documentation of 1 dose of MMR	**1 dose** needed
		Documentation of 2 doses of MMR, lab evidence of immunity or lab confirmation of disease[1]	**0 doses** needed
	Not high risk	N/A: presumed to have had measles	**0 doses** needed
Between 1957 and 1968	**HIGH Risk (see categories above)**	No prior MMR, no lab evidence of immunity or lab confirmation of disease[1]	**2 doses** needed
		Vaccinated before 1968 with inactivated (killed) measles vaccine or vaccine of unknown type[2]	**2 doses** needed
		Documentation of 1 dose of MMR	**1 dose** needed
		Documentation of 2 doses of MMR, lab evidence of immunity or lab confirmation of disease[1]	**0 doses** needed
	Not high risk	No prior MMR, no lab evidence of immunity or lab confirmation of disease[1]	**1 dose** needed
		Vaccinated before 1968 with inactivated (killed) measles vaccine or vaccine of unknown type[2]	**1 dose** needed
		Documentation of 1 dose of MMR, lab evidence of immunity or lab confirmation of disease[1]	**0 doses** needed
After 1968	**HIGH Risk (see categories above)**	No prior MMR, no lab evidence of immunity or lab confirmation of disease[1]	**2 doses** needed
		Documentation of 1 dose of MMR	**1 dose** needed
		Documentation of 2 doses of MMR, lab evidence of immunity or lab confirmation of disease[1]	**0 doses** needed
	Not high risk	No prior MMR, no lab evidence of immunity or lab confirmation of disease[1]	**1 dose** needed
		Documentation of 1 dose of MMR, lab evidence of immunity or lab confirmation of disease[1]	**0 doses** needed

Who should NOT receive the MMR vaccine?	
Pregnant people	*Safe to vaccinate before getting pregnant or wait until after giving birth. Safe for breastfeeding mothers.*
Severely immunocompromised individuals	*Patients with hematologic and solid tumors, patients receiving chemotherapy, patients with congenital immunodeficiency, patients with HIV, patients on long-term immunosuppressant therapy*

1. Serology testing with negative IgG antibody against measles indicates lack of immunity or prior infection.
2. The inactivated (killed) measles vaccine was available from 1963-1967 and is not considered to be effective.
3. Serology testing with positive IgG antibody against measles indicates adequate immunity or prior infection.

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov. DOH 348-1112 June 2025